

<b>UNITED STATES BANKRUPTCY COURT DISTRICT OF IDAHO</b>	<b>ORIGINAL PROOF OF CLAIM</b>
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In Re: James S. Horvath  
SSN # 563-08-8499                      SSN #

Case Number:  
01-00448                      Chapter 13

Note: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

U.S. COURTS  
2001 APR -2 PM 3:28

Name of creditor:  
*(The person or entity to whom the debtor owes money or property)*  
HomeEq Servicing Corporation, fka The Money Store  
Its Successors and Assignees

- ☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
- ☐ Check box if you have never received any notices from the bankruptcy court in this case.
- ☐ Check box if the address differs from the address on the envelope sent to you by the court.

Name and address where notices should be sent:  
HomeEq Servicing Corporation  
Attn: AIM cash  
4837 Watt Ave. Suite 100  
Mail Code M05334  
North Highlands, CA 95660

Account or other number by which creditor identifies debtor:  
0084239169

Check here if this claim:  
☐ replaces    ☐ amends a previously filed claim, dated:

1. Basis for claim:

- ☐ Goods sold  
☐ Services performed  
☒ Money loaned - real estate  
☐ Personal injury / wrongful death  
☐ Taxes  
☐ Other

- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)  
☐ Wages, salaries, and compensations (fill out below)  
Your social security number  
Unpaid compensations for services performed  
from                      to                      (date)                      (date)

2. Date debt was incurred:  
10/26/99

3. If court judgment, date obtained:

4. Classification of claim: Under Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured priority, (3) Secured. It is possible for a claim to be in one category and part in another. Check the appropriate box or boxes that best describe your claim and state the amount of the claim.

- ☒ **Secured Claim:** \$71,832.20  
Attach evidence of perfection of security interest  
Brief description of collateral:  
☒ Real estate    ☐ Motor vehicle    ☐ Other (describe)  
Amount of arrearage/other charges included in secured claim above,  
if any: \$7,061.11  
(Includes \$7061.11000000 amortized at 9.6% for 0 months.)
- ☐ **Unsecured Nonpriority Claim:**  
A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.

- ☐ **Unsecured Priority Claim:**  
Specify the priority of the claim.  
☐ Wages, salaries, or commissions (up to \$2000), earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier) --11 U.S.C. § 507(a)(3)  
☐ Contributions to an employee benefit plan -- U.S.C. § 507(a)(4)  
☐ Up to \$900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use--11 U.S.C. § 507(a)(6)  
☐ Taxes or penalties of governmental units--11 U.S.C. § 507(a)(7)  
☐ Other--11 U.S.C. § 507 (a)(2), (a)(5)--(describe briefly)

5. Total Amount  
of Claim at Time  
Case Filed:

(Unsecured)                      \$71,832.20                      (Priority)

\$71,832.20  
(TOTAL)

☐ Check this box if claim includes prepetition charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6. Credits and setoffs: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.

7. Supporting documents: Attach copies of supporting documents such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.

8. Time-stamped copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Date:

March 22, 2001

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)

*Jinda Wright*

Fidelity National Foreclosure Solutions, its attorney in fact

**SEND CLAIM TO:**  
Clerk of Court  
U.S. Bankruptcy Court  
550 West Fort Street, MSC042  
Boise, ID 83724

PAY4 0084239169 AS-OF 02/21/01 PAYOFF CALCULATION TOTALS 03/21/01 17:03:31  
NAME JS HORVATH CONTACT NAME JAMES S HORVATH

PRINCIPAL BALANCE	64,671.64	-----	RATE CHANGES	-----
INTEREST 02/21/01	4,491.85	INT FROM	RATE	AMOUNT
PRO RATA MIP/PMI	.00	06/01/00	9.60000	4,491.85
ESCROW ADVANCE	900.34	02/22/01		
ESCROW BALANCE	.00			
SUSPENSE BALANCE	.00			
HUD BALANCE	.00			
REPLACEMENT RESERVE	.00			
RESTRICTED ESCROW	.00			
TOTAL-FEES	1,505.24			
ACCUM LATE CHARGES	248.13			
ACCUM NSF CHARGES	15.00			
OTHER FEES DUE	.00			
PENALTY INTEREST	.00			
FLAT/OTHER PENALTY FEE	.00	TOTAL INTEREST		4,491.85
CR LIFE/ORIG FEE RBATE	.00	TOTAL TO PAYOFF		71,832.20
RECOVERABLE BALANCE	.00	NUMBER OF COPIES: 1	PRESS PF1 TO PRINT	

BNKC 0084239169 BNKRUPCY PROOF OF CLM CH 13 INV 414 03/21/01 17:13:36  
JS HORVATH DUE 07/01/00 PMT 551.30 TYPE CONV. RES ARM  
1412 E LINCOLN AVENUE NAMPA ID 83686

----- PRE-PETITION CLAIM -----PRO FID-----  
CLAIMED ACKNOWLEDGED CONFIRMED CLAIM TOT CONFIRMED TOT PRIN BALANCE  
02-26-01 7,061.11 \* 7,061.11 64,671.64  
REVISED CLAIM MONTH: MM/YY PRE-PETITION CLAIM: Y CLAIM DETAIL OVERRIDE: Y  
----- PAYMENTS ----- LATE CHARGES -----  
DUE DATE - DUE DATE AMOUNT TOTAL NUM AMOUNT TOTAL PD-TO-DT  
07-01-00 - 02-01-01 551.30 4,410.40 8 27.57 220.56

07-01-00 - 02-01-01 4,410.40 8 220.56 .00

BNKC 0084239169 BNKRUPCTY PROOF OF CLM CH 13 INV 414 03/21/01 17:13:41  
JS HORVATH DUE 07/01/00 PMT 551.30 TYPE CONV. RES ARM  
1412 E LINCOLN AVENUE NAMPA ID 83686

----- PRE-PETITION CLAIM -----PRO FID-----  
CLAIMED ACKNOWLEDGED CONFIRMED CLAIM TOT CONFIRMED TOT PRIN BALANCE  
02-26-01 7,061.11 \* 7,061.11 64,671.64  
REVISED CLAIM MONTH: PRE-PETITION CLAIM: Y CLAIM DETAIL OVERRIDE: Y

----- FEES -----  
FEE TYPE FEE DESCRIPTION CLAIMED CONFIRMED AMOUNT PAID  
AT ATTORNEY FEES 1,502.24 1,502.24 .00  
AV ESCROW ADVANCES 900.34 900.34 .00  
LC ACCRUED LATE CHRGS 27.57 27.57 .00

2,430.15 2,430.15 .00